



# FAIRFAX COUNTY FIRE & RESCUE DEPARTMENT FIRE MARSHAL'S OFFICE

12099 Government Center Pkwy, 3<sup>rd</sup> Floor, Fairfax, VA 22035

Telephone: 703-246-4803, TTY 711, Fax: 703-246-6044

[FMO Homepage - https://www.fairfaxcounty.gov/fire-ems/fire-marshal](https://www.fairfaxcounty.gov/fire-ems/fire-marshal)



## FPCP APPLICATION

APPLICATION FOR FIRE PREVENTION CODE PERMIT (FPCP)

\*\*\* ALL INFORMATION MUST BE PROVIDED BEFORE THIS APPLICATION WILL BE PROCESSED \*\*\*

Detailed permit descriptions and fees are outlined in the FPCP Requirements guideline located on the Fire Marshal's Office website. Call 703-246-4803 for assistance.

Application for a Fire Prevention Code Permit is hereby made by the undersigned for the following:

FPCP DESCRIPTION

FPCP FEE

FIDO CODE

Open Flame and Candles: Public Meetings/Gatherings in A and E Use Groups (Each Event)

\$78

F3FLM2

Include the following with this permit application:

- Submit a representative sample of each type of open-flame decorative device or candle requiring approval under this permit application. Photographs or drawings will not be accepted as substitute for a sample.
- Include the manufactures' instructions, safety guidelines, device specification sheets, and Safety Data Sheets (SDS) where provided along with this application.

**NOTICE:** Absent these documents, the Fire Marshal's Office can only make a subjective evaluation on the safety and adequacy of a particular sample with respect to compliance with the Fire Prevention Code; therefore, approval may not be possible without the above information and an appropriate sample device.

Total Amount Due: **\$78**

**Return this application to the above address with payment.  
Make Check or Money Order Payable to "County of Fairfax."**

Business / Headquarters: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Zip Code

I, \_\_\_\_\_, hereby accept full responsibility for the adherence to all requirements of  
Printed Name  
the Virginia Statewide Fire Prevention Code (SFPC) and the Fairfax County Fire Prevention Code pertaining to the above Fire Prevention Code regulated process, installation, storage, occupancy or use applied for in this permit application.

Permit / Inspection Location Name: \_\_\_\_\_

Permit / Inspection Location: \_\_\_\_\_

Zip Code

Non-RUP or Zoning Permit # (Required for all Commercial Occupancies): \_\_\_\_\_

Signature of Person Making Application: \_\_\_\_\_  
Signature Date

Telephone: \_\_\_\_\_ Emergency Telephone: \_\_\_\_\_

FAX #: \_\_\_\_\_ EMAIL Address: \_\_\_\_\_

OFFICE USE ONLY: Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
☐ NEW ☐ ADD-ON Inspector: \_\_\_\_\_ Follow-Up Date: \_\_\_\_\_

